



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Brian D. Nordstrom
App. No.: 10/055,326
Filed: January 22, 2002
Title: PAINTBRUSH HOLDER
Art Unit: 1744
Examiner: M. Spisich

Confirmation No.: 8025

Docket No.: N1-002-01-US
Customer No: 22,854

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AND RESPONSE

Sir:

In response to the Office Action of January 9, 2004, please amend the above-identified application as follows:

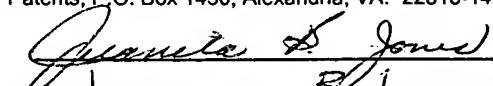
Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks/Arguments begin on page 7 of this paper.

CERTIFICATE OF MAILING (37 C.F.R. § 1.8(a))

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Date: February 25, 2004


JUANITA B. JONES
(type or print name of person certifying)



Image

AF/1744

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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/055,326	
	Filing Date	January 22, 2002	
	First Named Inventor	Brian D. Nordstrom	
	Group Art Unit	1744	
	Examiner Name	M. Spisich	
Total Number of Pages in This Submission	9	Attorney Docket Number	N1-002-01-US

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Moore, Hansen & Sumner Customer Number 22,854
Signature	<u>James R. Hakomaki</u> , James R. Hakomaki 35,037
Date	February 25, 2004

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Typed or printed name	JUANITA B JONES		
Signature	<u>Juanita B. Jones</u>	Date:	February 25, 2004

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA. 22313-1450